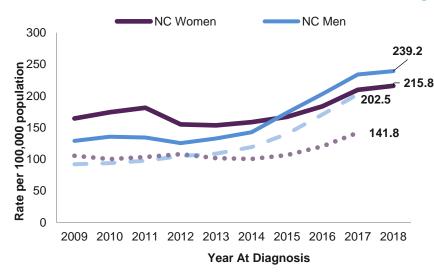
Gonorrhea in North Carolina, 2018



Gonorrhea continues to increase among men and women



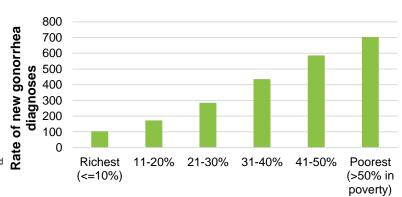
- 23,593 gonorrhea infections were reported in 2018 (rate of 227.2 per 100,000 population).
- Among men, gonorrhea diagnoses increased 75% from 6,896 in 2014 to 12,084 in 2018; this may in part be due to increased screening among men. Men also increased from 46% to 51% of the total population diagnosed with gonorrhea during this time.
- The Southeast region of the U.S. has the highest sexually transmitted disease rates in the nation (CDC 2018).

Disparities by income-level are particularly large for gonorrhea

Gonorrhea rates are highest among people living in the most impoverished neighborhoods.

People living in impoverished areas often have less access to resources, including health resources. This can increase the potential for transmission to others.

*Estimates of people living below the poverty line within a census tract and all population estimates obtained from the American Community Survey, 2013-2017 5-year estimate (https://www.census.gov/programs-surveys/acs/).

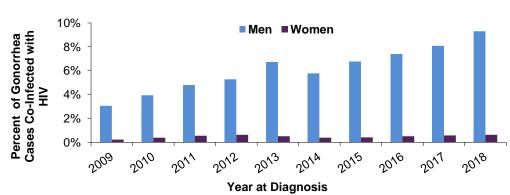


Proportion of census tract living in poverty*

Gonorrhea and HIV coinfection is increasing

The number of people with gonorrhea who also have HIV has doubled over the past five years (2018: men = 1,124, women = 72).

Clinicians should discuss preexposure prophylaxis (PrEP) with all patients diagnosed with gonorrhea.





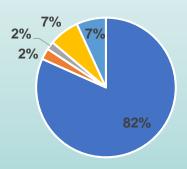
Gonorrhea in North Carolina, 2018



What is North Carolina doing about gonorrhea?

- North Carolina funds screening for gonorrhea for all women who are seen in publicly funded health care facilities, such as local health departments and family planning settings.
- Nurses in the North Carolina Division of Public Health Technical Assistance and Training Program work with county staff to ensure correct treatment of gonorrhea: https://www.cdc.gov/std/tg2015/default.htm.
- North Carolina is participating in a nation-wide program tracking down drug-resistant gonorrhea called Strengthening the United States Response to Resistant Gonorrhea (SURRG). For more information: https://www.cdc.gov/std/gonorrhea/arg/CARB FACTSHEET-2018.pdf.
- People with gonorrhea are at risk for HIV and can be offered PrEP, which is a treatment that can prevent HIV.
 For more information about PrEP, visit https://pleaseprepme.org/.

Overall treatment for gonorrhea



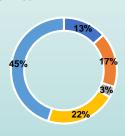
- First Line Recommended Treatment
- Second Line Recommended Treatment
- Ceftriaxone Only
- No Treatment Reported
- Incorrect Medication Reported

Gonorrhea Treatment, 2018

- Correctly treating gonorrhea is very important to prevent drug resistance.
- In 2018, the following drugs were common INCORRECT treatments given for gonorrhea:
 - Doxycycline & Ceftriaxone
 - Ceftriaxone Only
 - Azithromycin Only
 - Doxycycline Only

Incorrect Treatment for gonorrhea

- Other Medication
- Azithromycin Only
- Doxycycline Only
- Ceftriaxone Only
- Doxycycline and Ceftriaxone



 Most of the incorrect treatment is either an old treatment regimen or one but not both of the two medications recommended for dual treatment.

What CLINICIANS can do

- Always ask patients about their sexual activity and test those that are sexually active; test pharynx, urethra, and rectum, as appropriate.
- Provide treatment consistent with the CDC guidelines (https://www.cdc.gov/std/tg2015/default.htm).
- Follow-up with patients to ensure treatment was completed and refer partners for evaluation and treatment.

If you have a gonorrhea infection, ensure that you and your partners get treatment and you get retested after 3 months. Untreated gonorrhea can lead to increased risk for HIV and pelvic inflammatory disease (PID).

Data Sources: North Carolina Electronic Disease Surveillance System (NC EDSS) (data as of May 1, 2019) and enhanced HIV/AIDS Reporting System (eHARS) (data as of June 26, 2019).